

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) The Voices of the American Federation of Government Employees			FEC IDENTIFICATION NUMBER ▼ C C00512293		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on					
		M M / D D / Y Y Y Y Y Y 10 / 01 / 2012			
Full Name (Last, First, Middle Initial) of Payee WORKING AMERICA			Date M M / D D / Y Y Y Y Y Y 06 / 07 / 2012		
Mailing Address 815 16TH ST NW			Amount 33334.00		
City WASHINGTON State DC Zip Code 20006		Transaction ID : SE.4185			
Purpose of Expenditure Voter education in the state of NM		Category/ Type	Office Sought: <input type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: MARTIN TREVOR HEINRICH			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 33334.00					
Full Name (Last, First, Middle Initial) of Payee			Date		
Mailing Address			M M / D D / Y Y Y Y Y Y		
City State Zip Code			Amount		
Purpose of Expenditure		Category/ Type	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought					
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			33334.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Mr. Jeffrey David Cox		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Signature					

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F24A
Transaction ID :

A duplicate independent expenditure was incorrectly entered onto the 24 hour report which was a clerical errorer and has now been removed.

Form/Schedule:
Transaction ID: